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Via Electronic Mail

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Mr. Ryan Hatfield
General Counsel
West Virginia Board of Pharmacy
2310 Kanawha Blvd. East
Charleston, West Virginia 25311
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**RE: CVS Health comments 15 CSR 19 Title 15 Legislative Rule West Virginia Board of Pharmacy
Series 19 Inspections**

Dear Mr. Hatfield,

I am writing to you in my capacity as Pharmacy Regulatory Affairs Director for CVS Health and its family of pharmacies located across the country. CVS Health appreciates the opportunity to submit comments on the West Virginia Board of Pharmacy ("Board") Rules and would like to thank the Board for their constant vigilance to continuously improve regulations that enhance Pharmacist Care and guide the practice of pharmacy in West Virginia. Through our integrated offerings across the spectrum of pharmacy care, we are uniquely positioned to provide greater access to care, engage plan members in behaviors that improve their health, and lower overall costs for health plans and their members. CVS Health provides multiple points of care to patients via our retail, mail, infusion, long-term-care, specialty pharmacies and Minute Clinics.

I would like to provide you with feedback regarding 15-19-6. **Conducting Inspections.**

As written, the proposed language in section 6.10 does not allow for flexibility and collaboration between and inspector and a licensee to address perceived areas of non-compliance. Specifically, section 6.10 creates the following concerns:

1. Facilities not meeting the expected corrections

There may be instances where an observed observation by an inspector is based on an interpretation of the applicable law or regulation that differs from a licensee's interpretation or a misunderstanding of the applicable facts used to reach a conclusion. In that event, a healthy discourse between the Board and the licensee should occur so that both parties could get aligned and educated on the facts, laws, and rules at hand. Therefore, the "expected corrections" required in the rule should have some flexibility to ensure that issues of rule or law are rectified before corrections are made.

2. Within the timeframe established by the inspector

In the event a "correction" is required, timeframes may differ based on the correction itself. For instance, a correction that requires an IT change would substantially differ in timeframe from another corrective action. Therefore, the timeframe should be established based on a mutual agreement between the parties rather than a timeframe imposed by the inspector.

3. Shall be referred to the Complaint Committee of the Board

As previously referenced, the collaboration between the inspector and licensee should have some flexibility and there should be discretion on the part of the inspector to refer matters to the Complaint Committee of the Board. To allow for that discretion to occur, CVS recommends utilizing the word "may" instead of "shall".

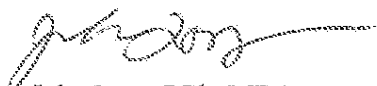
In the spirit of cooperation and collaboration, CVS Health respectfully submits the following draft changes. We believe these draft changes will create a process whereby resolution can be achieved timely and fairly, while decreasing administrative burden for the Board and its licensees.

~~6.10. Facilities not meeting the expected corrections within the timeframe established by the inspector shall be referred to the Complaint Committee of the Board.~~

6.10. Facilities, after discussion and alignment with the inspector on potential corrections, not meeting the mutually expected corrections within the mutually agreed upon timeframe established by the inspector ~~shall~~ may be referred to the Complaint Committee of the Board.

Thank you in advance for your consideration and let me know if I can answer any questions you may have regarding the updated language.

Best regards,



John Long RPh, MBA